



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

WJ0982189136

INSTALLATION ADDRESS

PAN AMERICAN AIRLINES INC  
399 INDUSTRIES AVENUE  
TEKERBORO  
NJ 07608

NJ

07074

EPA Form 8700-12B (4-80)

08/11/87



# EPA

United States Environmental Protection Agency  
Washington, DC 20460

**Notification of Hazardous Waste Activity**

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

**For Official Use Only**

## Comments

[illegible]

Installation's EPA ID Number													Approved			Date Received (yr. mo. day)							
C	N	J	D	9	8	2	1	8	9	1	3	6	T/A	C				8	7	0	7	2	3
F														1									

### I. Name of Installation

[illegible]

## II. Installation Mailing Address

## Street or P.O. Box

C	3	9	9		I	N	D	U	S	T	R	I	A	L		A	V	E	N	U	E								
---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	--	--	--	--	--	--	--	--

## City or Town

**State**

**ZIP Code**

City or Town																		State		Zip Code				
C	T	E	T	E	R	B	O	R	O	.								N	J	0	7	6	0	8

### III. Location of Installation

## Street or Route Number

[illegible]

## City or Town

## State

## ZIP Code

City or Town													State		Zip Code						
C	M	O	O	N	A	C	H	I	E						N	J	0	7	0	7	4

#### IV. Installation Contact

## Name and Title (last, first, and job title)

**Phone Number**  
(area code and number)

[illegible]

### V. Ownership

**A. Name of Installation's Legal Owner**

**B. Type of Ownership**  
(enter code)

[illegible]

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

### A. Hazardous Waste Activity

### B. Used Oil Fuel Activities

<input checked="" type="checkbox"/> 1a. Generator <input type="checkbox"/> 2. Transporter <input type="checkbox"/> 3. Treater/Storer/Disposer <input type="checkbox"/> 4. Underground Injection <input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel <i>(enter 'X' and mark appropriate boxes below)</i> <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner	<input checked="" type="checkbox"/> 1b. Less than 1,000 kg/mo.  <input type="checkbox"/> 6. Off-Specification Used Oil Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner <input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification
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VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler      ☐ B. Industrial Boiler      ☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only – enter 'X' in the appropriate box(es))

☐ A. Air    ☐ B. Rail    ☒ C. Highway    ☐ D. Water    ☐ E. Other (specify)

## IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ A. First Notification      ☒ B. Subsequent Notification  
(complete item C)

## ID - For Official Use Only

C

W

T/A

C

1

**X. Description of Hazardous Wastes (continued from front)**

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
X 7 2 3	X 7 2 1				
7	8	9	10	11	12
X 7 2 2					

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number 40 CFR Part 261.33 for each chemical substance your installation handles which may be hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

☒ 1. Ignitable (D001)    ☐ 2. Corrosive (D002)    ☐ 3. Reactive (D003)    ☐ 4. Toxic (D000)

**XI. Certification**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

Albert Luthringer

Name and Official Title (type or print)

Albert Luthringer, Manager,  
Airport Maintenance

Date Signed

1/15/90

**Estimated burden:** Public reporting burden for this collection of information is estimated to be 3 hours, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

United States Environmental Protection Agency  
Washington, DC 20460  
**Notification of Hazardous Waste Activity**Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).**For Official Use Only**

Comments

C

C

Installation's EPA ID Number

Approved

Date Received  
(yr. mo. day)

C

F

NJ0982189136

T/A C  
1

870723

Bergen  
003**I. Name of Installation**

P A N A M E R I C A N A I R L I N E S , I N C .

**II. Installation Mailing Address**

Street or P.O. Box

C

3

399 INDUSTRIAL AVENUE

City or Town

State

ZIP Code

C

4

TETERBORO,

NJ

07608

**III. Location of Installation**

Street or Route Number

C

5

90 MOONAC HIE AVENUE

City or Town

State

ZIP Code

C

6

MOONAC HIE

NJ

07074

**IV. Installation Contact**

Name and Title (last, first, and job title)

Phone Number (area code and number)

C

2

LUTHRINGER, A MGR M T

201 288 1775

**V. Ownership**

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C

R

PORT AUTHORITY / NY &amp; NJ

**VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)****A. Hazardous Waste Activity****B. Used Oil Fuel Activities**☒

1a. Generator

☐

1b. Less than 1,000 kg/mo.

☐

2. Transporter

☐

3. Treater/Storer/Disposer

☐

4. Underground Injection

☐5. Market or Burn Hazardous Waste Fuel  
(enter 'X' and mark appropriate boxes below)☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐6. Off-Specification Used Oil Fuel  
(enter 'X' and mark appropriate boxes below)☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐7. Specification Used Oil Fuel Marketer (or On site Burner)  
Who First Claims the Oil Meets the Specification**VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)**

N/A

☐

A. Utility Boiler

☐

B. Industrial Boiler

☐

C. Industrial Furnace

**VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))**☐

A. Air

☐

B. Rail

☒

C. Highway

☐

D. Water

☐

E. Other (specify)

**IX. First or Subsequent Notification**

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☒

A. First Notification

☐

B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number



X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Non-specific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6	7	8
X	7	2	3				
9							

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

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E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

- ☒ 1 Ignitable (D001)
- ☐ 2 Corrosive (D002)
- ☐ 3 Reactive (D003)
- ☐ 4 Toxic (D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature Albert Luthringer	Name and Official Title (type or print) Albert Luthringer, Manager Airport Maint.	Date Signed 7/22/87
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1987 JUL 23 AM 10:13  
NEW YORK, N.Y.  
AGENCY, REGION II  
ENVIRONMENTAL PROTECTION

Attachment





**TETERBORO**  
**airport**

Philip W. Engle  
Manager

GENERAL AVIATION DIVISION  
AGENCY REGION II  
NEW JERSEY  
90 JAN 26 PM 1:12  
TETERBORO AIRPORT  
BRANCH

January 15, 1990

USEPA - Region II  
Permits Administration Branch  
26 Federal Plaza, Room 505  
New York, NY 10278

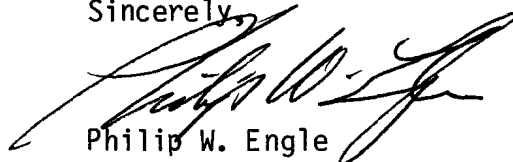
Re: EPA ID# NJD982189136  
Teterboro Airport  
Teterboro, New Jersey

Gentlemen:

We are transmitting herewith EPA Form 8700-12, Notification of Hazardous Waste Activity, for the above referenced facility. Operation of the facility has been transferred to Pan Am World Services, Inc. as assignee from Pan Am World Airways, Inc. The owner of the property is unchanged and remains the Port Authority of NY & NJ.

Furthermore, two additional hazardous wastes have been added for the facility. If you should have any questions or require further information, please contact Charles W. Kurtz at 201/288-5218.

Sincerely,



Philip W. Engle

3406E

Attachment

GENERAL AVIATION